# Total Hip Arthroplasty Learning Curves for New Fellowship-trained Surgeons Messina JC<sup>1</sup>, Magnuson JA<sup>2</sup>, Griffin SA<sup>2</sup>, Courtney PM<sup>2</sup>, Krueger CA<sup>2</sup>, Grosso MJ<sup>3</sup>

## INTRODUCTION

- The posterolateral (PL) approach is the most utilized approach for total hip arthroplasty (THA).
- The direct anterior (DA) approach has been gaining popularity, but there is concern that the DA approach is associated with a steeper learning curve than that of the PL approach.
- Both the PA and DA groups, had lower reoperation • The purpose of this study was to investigate if the learning curve is rates, surgical complications, and total complications similar for newly trained arthroplasty fellowship-trained surgeons when comparing the first 50 versus second 50 cases. using the DA vs PL approaches.

# Methods

- Two recently graduated DA and two recently graduated PL fellowship-trained arthroplasty surgeons were identified.
- Their first 100 primary THA cases in practice were collected and divided into 50 case cohorts for each surgeon.
- Age, sex, and BMI were collected for each patient along with the primary indication for surgery.
- Medical records were reviewed to determine 90-day Hip Society Standardized complications following surgery.
- Continuous variables were analyzed using independent sample t tests. Categorical variables were analyzed using chi-square tests or Fisher's exact tests.

<sup>1</sup> Department of Orthopedic Surgery, UConn Health <sup>2</sup>Rothman Institute at Thomas Jefferson University Hospital <sup>3</sup>Connecitcut Joint Replacement Institute

### RESULTS

When comparing the DA vs PL surgeons first 50 cases, there were no significant differences in reoperations (PL 4% vs DA 1%, p=0.15), surgical complications ((PL 9% vs DA 4%, p=0.06), and total complications (PL 13%) vs DA 7%, p=0.09).

For all surgeons combined, there were higher complications rates when comparing the first 50 cases to the second 50 cases for reoperations (2.8% vs 1.2%, p=0.2), surgical complications (6.6% vs 3%, p=0.036), and total complications (10% vs 6.3%, p=0.06).

	Posterior	Anterior	p-value
Reoperations first 50	4% (6/150	) 1% (2/150	) p=0.15
Surgical Complications First	50 9% (14/15	6) 4% (6/150	)) p=0.06
<b>Total Complications First 50</b>	13% (20/1	.50) 7% (11/15	60) p=0.09
Table 1: Complications by Approach			
	First 50	Second 50	
DA Reoperations	1% (2/150)	0% (0/100)	p=0.49
DA Surgical Complications	4% (6/150)	2% (3/150)	p=0.31
DA Total Complications	7% (11/150)	6% (9/150)	p=0.64
PL Reoperations	4% (6/150)	2% (3/150)	p=0.31
PL Surgical Complications	9% (14/150)	4% (6/150)	P=0.064



Table 2: Complications by First 50 Cases and Second 50 Cases

**PL Total Complications** 

13% (20/150) 6.5% (10/150) p=0.054

Figure 1: Combined Complications (Both DA and PL surgeons) during first 50 and second 50 cases

### CONCLUSION

- This study suggests a learning curve for all THA surgeons during their first 50 cases in practice.
- There were no differences in the learning curve when comparing the DA and PL approach for fellowshiptrained arthroplasty surgeons.
- With proper training, early-career surgeons can safely perform THA with similar complication rates regardless of approach.

### DISCLOSURES

These authors do not have a financial interest or other relationship with a commercial company or institution.

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